

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.     | DATE    |
|---------------------------|----------|------------|---------|
| FEE DETERMINATION         |          |            |         |
| O.I.P.E. CLASSIFIER       |          | 6          | 5-25-01 |
| FORMALITY REVIEW          |          |            |         |
| RESPONSE FORMALITY REVIEW |          |            |         |
|                           | SA       | E 596617/1 | E-5-01. |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim                        | Date |
|------------------------------|------|
| Final<br>Original<br>1/25/01 |      |
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If more than 150 claims or 10 actions  
staple additional sheet here

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